After Baby: Postpartum Care Instructions

Your instructions and restrictions will depend on the type of birth you have. Regardless, it generally takes about 6 weeks to fully recover and return to normal. As each day and week pass you will feel better and stronger. Get plenty of rest. Nap when the baby naps. Limit time and number of visitors. Do activities in moderation. No strenuous work, heavy lifting, or excessive social activity. Plan to have someone constantly available to help you during the first 3 to 5 days at home. You probably will need at least some assistance still for the first two weeks after delivery.

When to call your doctor

- Fever over 100.5 degrees
- Heavy bleeding (soaking a pad within an hour or less)
- Pain with urination
- Extreme swelling or pain in the breasts
- Feelings of depression; severe anxiety; or serious thoughts of harming yourself, baby, or others
- Fainting

Appointments

Your doctor will recommend when to come in for a check up appointment at the time you are released from the hospital. Call the office to schedule the appointment as soon as you get home. Most patients having c-section will be seen within 7 – 10 days after delivery. For vaginal births the first appointment may be 2 – 6 weeks after delivery. Remember to bring any current medications and a list of any questions you may have to your appointment.

Be sure to contact your insurance company to notify them of your recent delivery and to enroll the new baby on your insurance. For the baby, appointments with the pediatrician should be scheduled per the pediatrician’s recommendations.
Frequently asked questions

- Bathing: None. Shower only for the first two weeks.
- Driving: Do not drive if you are still taking any narcotic pain medication. If you have had a vaginal birth you may drive after one week unless you are having pain or weakness in your legs. Wait at least 2 weeks to drive after a c-section.
- Travel: No long trips for the first two weeks.
- Exercise: After one or two weeks you may begin regular walking exercise. Avoid cardiovascular training until at least 6 weeks after delivery.
- Intercourse: No intercourse for 6 weeks. At your last postpartum check-up an exam will be performed to confirm satisfactory healing. Feeling back to normal and like you are ready to have sex may take several months.
- Birth Control: Avoid accidents. It is possible to get pregnant any time after child birth. If you have intercourse before starting prescription contraception use condoms. Options for birth control will be discussed at your appointments.
- Menstrual periods: Return of normal menstrual cycles for women who are not breast feeding and not starting birth control usually occurs 6 to 12 weeks after delivery. If you are breast feeding and/or starting birth control this change your hormone cycle and periods may be unpredictable. Do not douche or use tampons during the first 6 weeks after delivery. Reddish-brown “lochia” discharge is normal and usually occurs during the first 3 weeks after birth. It is normal to occasionally pass a small blood clot. Call the office if you are worried your bleeding is too heavy.
Vaginal Birth Stitches Care
Stitches place to repair an episiotomy or tear from a vaginal birth are dissolvable and do not need to be removed. It takes about 2 weeks for the stitches to dissolve. Use a spray bottle of clean water to cleanse after urinating or having a bowel movement. Perform warm water Sitz baths by sitting in 4 inches of warm water for a few minutes 2 – 3 times per day, allowing the water to run continuously over the area.

Breast feeding
Wear a supportive bra. Cleanse your nipples with warm water. Use a lanolin nipple ointment, such as Lansinoh, to protect the skin from cracking. Apply ice or ice water to nipples a few minutes before feeding baby to reduce the initial latching on pain. Feed baby every 2 – 3 hours to prevent engorgement. For other problems with breast feeding, contact the hospital lactation consultant or the office. You will notice painful uterine cramps when you breast feed. Ibuprofen is the best medicine to reduce these pains.

Generally, medications that are safe to take during pregnancy are also safe while breast feeding. Call the office if you have questions about specific medications.

Breast Care (not breast feeding)
Wear a good support bra. Avoid nipple stimulation. Do not let water hit your breasts for more than a few seconds when showering. Cold compresses such as ice packs will reduce engorgement. Many patients get excellent relief from engorgement by using placing cool, fresh green cabbage leaves into the bra cups every 2 – 3 hours. Use Tylenol or ibuprofen for pain. Medications are not prescribed to dry up breast milk.

Swelling
Patients frequently notice worsening swelling in the legs and ankles 2 – 3 days after delivery. Elevate your legs frequently. Avoid salty foods. The swelling usually resolves 7 – 10 days after delivery.

C-section birth instructions
Your c-section incision should be cleaned daily with warm, soapy water. While standing in the shower, squeeze a soapy washcloth above the incision and allow the
water to run slowly over the incision. Do not scrub. Rinse thoroughly. Pat dry, always using a clean towel. Generally you may leave the incision uncovered. To absorb any slight drainage or excessive sweating you may place gauze bandages or a panty liner over the incision. If you have staples, these are usually removed at your first postpartum appointment 1 week after delivery. Stitches are dissolvable and do not need to be removed. If you have steristrips it is okay to remove them in the shower 1 week after surgery.

**Hemorrhoids**
Topical medications, available over-the-counter for hemorrhoids, are acceptable treatments. These include Preparation-H, Anusol, and Tucks pads. Take stool softeners and laxatives to treat constipation and reduce the need for straining to have a bowel movement. Other medications topical medications may be prescribed for more severe cases.

**Constipation**
Most over-the-counter medications are excellent for the treatment of constipation after baby. Colace and Senokot are stool softeners that can be taken routinely. Take a laxative such as Dulcolax or Milk of Magnesia as needed to treat constipation that does not resolve with stool softeners. Eat a high fiber diet and drink 6 to 8 20-ounce glasses of water daily to help maintain normal bowel movements. For worse cases of constipation that do not resolve with these measures check with your doctor.

**Kegel exercises**
Kegel exercises are recommended for all women after delivery. These simple exercises strengthen the pelvic muscles and increase your ability to control bladder function. While it is common to experience light urine leakage if you cough or sneeze after birth, these exercises will help your body regain control to prevent such leakage. Begin by simply trying to stop your flow of urine when you sit to urinate. The muscles you must tighten to stop urinating may feel weak or difficult to tighten at first. With practice you will increase sensitivity and ability to tighten these muscles. Eventually you will work up from briefly trying to tighten these muscles when you urinate, to being able to tighten them for several seconds at random times throughout the day. Make these exercises a habit and you should quickly regain normal function. If you continue to have problems, notify your doctor as this may be a sign of possible bladder infection.